



HOREB CHRISTIAN SCHOOL

A Ministry of Iglesia Bautista Horeb

795 West 68th Street - Hialeah, Florida 33014

Phone 305-557-6811 – Fax 305-821-5048

CC: Students File/ Mr. Cruz

COMMUNITY SERVICE REQUEST FORM

To be completed by Student:

Student Name: _____ Grade: _____ Class of : _____

Where was service rendered: _____

What did you do? _____

Date (month/day/year): _____

Hours of Service (time of day): _____

Hours per day: _____

Total of Hours: _____

To be completed by supervisor:

(No payment may be accepted by student for services rendered.)

Name of Organization/Charity/Agency

Address of Organization/Charity/Agency

Duties performed by Student

Name

Supervisor's Title

Telephone Number

Supervisor's Signature

Date

To be completed by student and parent:

To the best of my knowledge, the above information is accurate.

Student's Signature: _____

Parent's Signature: _____